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Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 207 7590 01/16/2007 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. WEINGARTEN, SCHURGIN, GAGNEBIN & LEBOVICI LLP TEN POST OFFICE SQUARE BOSTON, MA 02109 02/15/2007 RFEKADU2 00000096 09649122 (Depositor's name) Constance Clark Gagnebin (Signature) ûê FC:8001 1400.00 OP (Date) February 13, 2007 CONFIRMATION NO. APPLICATION NO. **FILING DATE** FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 7057 1768.2001-001 09/649,122 08/28/2000 Chandan Adhikari TITLE OF INVENTION: BUSINESS VOLUME AND WORKFORCE REQUIREMENTS FORECASTER PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN, TYPE **SMALL ENTITY ISSUE FEE DUE** 04/16/2007 nonprovisional \$0 \$1400 NO \$1400 \$0 **ART UNIT EXAMINER CLASS-SUBCLASS** KOPPIKAR, VIVEK D 3626 705-007000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Weingarten, Schurgin, (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, Kagnebin & Lebovici LLP (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE KRONOS TECHNOLOGY SYSTEMS LIMITED PARTNERSHIP Chelmsford, Massachusetts ☐ Individual 【 Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: A check is enclosed. Issue Fee Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. 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